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APPLICANTS

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** CONTINUING DATA *****

none ASL

** FOREIGN APPLICATIONS *****

none ASL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/17/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance			<i>25/0</i>	<i>8/2</i>

ADDRESS

34456
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TITLE

System for digital stream transmission and method thereof

FILING FEE RECEIVED 1344	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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